DOCUMENT RESUME

ED 378 433 CE 068 158

AUTHOR Fletcher, Karen; Tripp, Connie

TITLE Focus on Communication.
INSTITUTION Denver Public Schools, Colo.
SPONS AGENCY Office of Vocational and Adult Education (ED), Washington, DC. National Workplace Literacy Program.
PUB DATE 31 May 94
NOTE 57p.; For related modules, see CE 068 153-167.
AVAILABLE FROM Emily Griffith Opportunity School, 1250 Welton Street, Denver, CO 80204 ($16.90).
PUB TYPE Guides - Classroom Use - Teaching Guides (For Teacher) (052)

EDRS PRICE MF01/PC03 Plus Postage.
DESCRIPTORS Adult Basic Education; *Adult Literacy; Behavioral Objectives; *Communication Skills; Learning Activities; Learning Modules; *Literacy Education; Problem Solving; Telephone Usage Instruction; Verbal Communication; Workshops
IDENTIFIERS *Workplace Literacy

ABSTRACT

This module was developed by educators from the Emily Griffith Opportunity School. Designed for a broad spectrum of employees at a health care facility for the elderly, this three-session workplace literacy workshop is designed around a basic three-part communication model that includes listening, problem solving, and follow-up, along with a customer service focus. It provides a review of communication skills that participants may already have and offers strategies that may be useful in more difficult or complicated communication situations. The three 1-hour sessions are designed to be presented by two facilitators in order to demonstrate both positive and negative communication situations using role play. Session 1 provides an overview of the workshop and an introduction to the three-part communication model. Concepts and skills are introduced with the aid of flipcharts and handouts. Each of the workshop lesson plans contain the following: facilitator's notes, materials needed, room set-up, and a step-by-step narrative of the lesson activities. Workshop evaluation handouts are also included. (KC)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED 378 433

FOCUS ON COMMUNICATION

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)
☐ This document has been reproduced as received from the person or organization originating it
☐ Minor changes have been made to improve reproduction quality
• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy

Karen Fletcher
Connie Tripp

Emily Griffith Opportunity School
1250 Welton Street
Denver, Colorado 80204

May 31, 1994

CE 068 158

BEST COPY AVAILABLE

FOCUS ON COMMUNICATION

The activity which is the subject of this report was supported in part by the U.S. Department of Education. However, the opinions expressed herein do not necessarily reflect the position or policy of the U.S. Department of Education or Emily Griffith Opportunity School, Denver Public Schools, and no official endorsement by these agencies should be inferred.

© 1994 by
Workplace Education Project
Emily Griffith Opportunity School,
Denver Public Schools
All Rights Reserved
Denver, Colorado

Karen Fletcher & Connie Tripp

May 20, 1994

INTRODUCTION TO THE WORKPLACE LITERACY PROJECT

This module was developed by educators from Emily Griffith Opportunity School as part of a National Workplace Education grant funded by the U.S. Department of Education. A cooperative effort between the business and education communities, the program was designed specifically to enhance employees' literacy skills.

Direct benefits to the workforce include improved morale and motivation, self-esteem, teamwork, and promotional opportunities.

We gratefully acknowledge the assistance of our partners. In addition we recognize all of the students who participated in classes and who provided us with invaluable feedback for strengthening future classes.

We hope partnerships such as these will provide the catalyst for developing new or continued on-site educational opportunities.

TABLE OF CONTENTS

SECTION	PAGE
Introduction	ii
Synopsis	iv
Foreword	v
Session 1 - Introduction and Active Listening	1
Session 2 - Problem-Solving and Responding to Criticism	19
Session 3 - Follow-Up and Confronting	33

SYNOPSIS

This 3-session workshop is designed around a basic 3-part communication model: listening, problem-solving, and follow-up. It provides a review of communication skills participants may already have and offers strategies that may be useful in more difficult or complicated communication situations.

FOREWORD

This curriculum was designed for a broad spectrum of employees at a health care facility for the elderly. Participants came from the following areas: food service, rehabilitation/ physical medicine, radiology, admissions, plant operations, and nursing. The goal is to increase awareness and use of effective techniques to improve communication among employees and between employees and patients. The objectives are the result of discussions with supervisors and social workers who identified communication needs such as: conflict resolution, stress reduction, respect for others/sensitivity, teamwork, and professionalism. We also interviewed employees and observed them on the job to gain further insight about these issues.

This curriculum focuses on basic communication skills, especially those dealing with listening, finding a win-win solution, and remaining non-defensive in a conflict. It also addresses customer service at the facility.

The three one-hour sessions are presented by two facilitators in order to demonstrate both positive and negative communication situations using role-play. The role-plays were developed based on our observations and employee suggestions, to make them as worksite-specific as possible.

Session I provides an overview of the workshop and an introduction to the 3-part communication model. One part of this model serves as the focus for each of the three sessions. Concepts and skills are introduced with the aid of flipcharts and handouts.

Role-play and other activities provide opportunities for participant involvement in discussion and practice.

In addition to the practice during the sessions, we suggested that supervisors do some form of follow-up in team or department meetings to further emphasize these strategies and use them to assist the group in problem-solving.

By practicing the communication techniques/strategies from this workshop, participants will see how improved communication skills can help solve problems at work as well as at home.

SESSION 1

INTRODUCTION and ACTIVE LISTENING

Facilitator's Notes:

Each session can be completed in an hour. The time you spend on presenting concepts will vary depending on questions and discussion. Allow 10-15 minutes for the participant activity at the end of each session so there is time for feedback.

Materials Needed:

- Flipchart & Easel
- Tape or Adhesive for Charts
- Markers
- Overhead Projector & Screen (Optional)
- Pens (available for participants)
- Flipcharts (FC) 1 - 8 (or transparencies)
- Handouts (H) 1 - 3

Setup:

- Put FCs 1, 2, & 3 on wall
- Leave other flipcharts on easel
- Distribute handouts before workshop begins

Activity	Notes
I. **Introduction**	
II. **Present** Benefits Flipcharts (FC 1 & 2)	**Suggested Opening**: "You might be asking yourself, what's in it for me..."
III. **Present** Agenda Flipchart (FC 3)	
IV. **Present** Definitions and Customer Service Flipcharts (FCs 4 & 5)	* Communications - 4 purposes * Customer - internal & external * Customer service - show statistics "The healthcare consumer is looking for service-oriented facilities. Patient satisfaction is based on quality of room, food, admission process, getting answers to questions, parking availability, etc." The Service Edge, by Ron Zemke, 1990.
Present "Patient Bill of Rights" Handout (H 1)	**Review**.
Elicit responses from large group & discuss.	**Ask** "Of the patient's rights, which ones stand out as involving communication with you?"

(Continued on next page)

Activity	Notes
	* The Patient Bill of Rights included is taken from Straight Talk: Communicating in Health Care Settings, 1991, Step Ahead. You may want to substitute your facility's version of the Bill of rights in order to tailor the workhop to meet employees needs.
V. **Draw** Problems in Communicating Flipchart (FC 6) * Elicit responses from participants * Jot on flipchart	**Ask** participants for workplace situations that hamper good communications. Possible Responses hearing loss — med. terminology dementia — mind set dysphasia — emotions time — illegible writing
VI. **Present** Communications Model Flipchart (FC 7)	**Explain**: Communication is a process, & always involves 3 components. - Listening - Problem-Solving - Following-up (continued on the next page)

Activity	Notes
	Explain that: We <u>LISTEN</u> to determine the real problem & to acknowledge how the speaker feels about it; during the <u>PROBLEM-SOLVING</u> phase, we discuss, negotiate, & offer choices to reach a win-win solution. <u>FOLLOW-UP</u> involves all parties doing what they agreed to do in a timely manner.
VII. **Present** Active Listening Handout (H 2)	
Read "goal & definition"	
Explain pie chart	**Stress** that we spend almost half of our communication time <u>listening</u>.
	Ask: "In light of this, what do you see as barriers to active listening?"
Do a Flipchart (FC 8) drawing "barriers" in a circle in the center. Branch off with their responses.	<u>Possible Responses</u> mind wandering noise distractions interruptions overreacting to speaker - emotions get in way of message busy planning response
Discuss strategies on Handout.	Follow each with a brief co-worker role-play by facilitators.

A. Role-Play: Empathizing

Worker #1	"Hi! How are you today?"
Worker #2	"Fine -- well, not really. I'm behind on all this paperwork because I got the doctor's orders late..."
Worker #1	"I know how frustrating that is. I had the same situation last week."

B. Paraphrasing

Worker #1	"So, what you've said is you're not happy with the way I did this. Let me make sure I understand what you're saying. In other words, I misfiled these records."
Worker #2	"Yes, they need to go in Mr. Johnson's file."

C. Clarifying

Worker #1	"You feel I'm not pulling my weight, right? Can you give me specific examples?"
Worker #2	"Well, I just thought ..."
Worker #1	"Can you tell me something in particular?"
Worker #2	"Sure. When I'm on the phone, would you help answer questions at the desk?"

D. Body Language

Ask for negative examples - tell them we'll role-play the positives later.

Activity	Notes
VIII. **Role-play Demonstration**	**Explain**: One will be the patient, the other a healthcare facility employee.

Patient:	"This bed is so uncomfortable! I can't seem to get it right. Could you help me raise the head of the bed?"
Employee:	(looking at patient) "Sure, I'll be glad to. (adjusts bed) "Is this better?" (goes on about work)
Patient:	"Those tests they give me are really something. First, they make me drink this horrible white chalky stuff. Then I have to wait half an hour & I can't even go to the bathroom! Next, I have to walk down a long hallway, in one of those stupid gowns, in my bare feet, to get to the X-ray machines. Don't they care how people feel?"
Employee:	(stops working) "Yes, I'm sure they do. Sometimes those tests can really be trying, but they're necessary so the doctor can get a clear picture of what's wrong with you. If you have to walk a ways for any more tests, you might tell the nurse about how cold your feet get, and how you feel walking around in just a gown. They'll usually help you out with some slipper socks, and let you wear a robe, if you have one."

Activity	Notes
IX. **Role-Play Practice** Handout (H 3)	**Explain**: This will give you an opportunity to practice active listening. In pairs, decide who will be the "talker" and who will be the listener."

Procedure:

The "talker" will describe a fairly **brief**, familiar **task or procedure** he or she performs at work or at home. This could be describing how to make a simple recipe or give the steps used in doing a household chore, such as washing your car.

The listener must **paraphrase, ask questions, empathize, etc.** to make sure he clearly understands the procedure. You'll have **10 minutes** to complete this exercise.

Afterwards, we'll ask for 2-3 volunteers to share what they learned with the group. This will include explaining the procedure to the group (briefly), but more importantly, telling how you **used paraphrasing, clarifying, etc.** to get your information.

Activity	Notes
X. **Discussion and Questions**	**Ask** participants to share how they used the listening techniques, etc.

FLIPCHART 1

WHAT'S IN IT FOR ME?

You'll Be More Effective In Communicating . . .

EXPRESS your feelings

PRESENT yourself well

TAKE criticism less personally

FIND a win-win solution

RESOLVE problems effectively

FLIPCHART 2

YOU'LL BE HAPPIER

- **More Self-Respect**
  - **Success with others**
  - **Feel better about yourself**
- **More Respect <u>From</u> Others**
  - **Empathy**
  - **Honesty**
  - **Directness**
  - **Dependability**
- **More Respect <u>For</u> Others**
  - **Recognize and appreciate skills, qualities and situations of others**

FLIPCHART 3

SESSION 1 - AGENDA

I. Definitions

II. Communication Model

III. "Active Listening"
- *** Empathizing**
- *** Paraphrasing/Clarifying**
- *** Positive Body Language**

IV. Role-play demonstration and practice

FLIPCHART 4

COMMUNICATION -

Exchange of thoughts, messages, or information by speech, signals, or writing.

Unavoidable - no response or leaving room sends message

4 Purposes of Communication

1) **tell - facts, how to do a job**

2) **sell - feelings, convince someone**

3) **learn - listen, ask questions to understand**

4) **decide - trade ideas, make decisions, or find the best solution**

FLIPCHART 5

Customer - anyone with whom you communicate

External - someone who has the choice of coming to you for service or going somewhere else.

Internal - co-workers

Customer Service - how you treat a "customer"

- **96%** of unhappy customers **never complain**
- **91%** of those who don't complain, **won't buy again**
- average unhappy customer tells **9** other people
- 13% will tell more than **20** people
- average unhappy customer will remember the incident for **23 1/2 years**
- average happy customer talks about pleasant experience for **18 months**

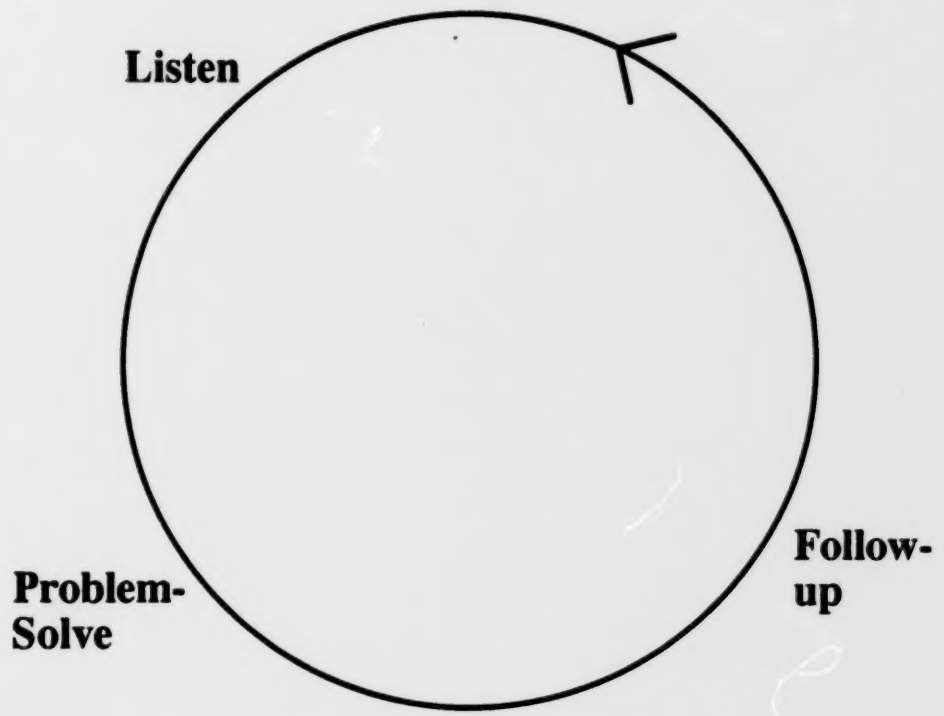
The Essentials of Excellent Customer Service, 1992, SkillPath, Inc.

FLIPCHART 6

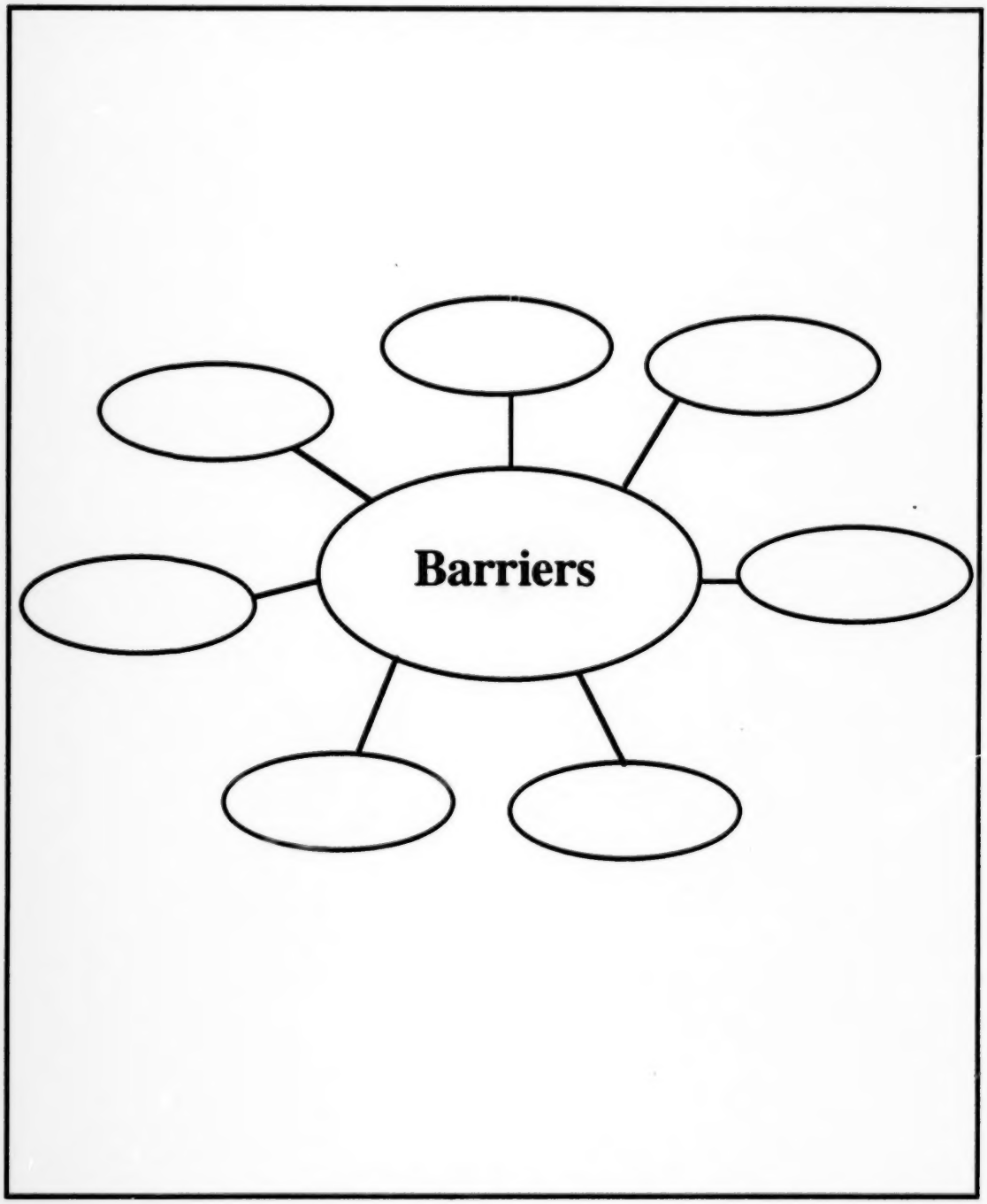
Problems In Communicating

FLIPCHART 7

COMMUNICATION MODEL



FLIPCHART 8



HANDOUT 1

Patient Bill of Rights

Many hospitals give patients a version of this list which was originally developed by the American Hospital Association.

The Patient has the right

- to considerate and respectful care
- to obtain from the physician complete current information concerning his diagnosis and treatment in terms the patient can understand
- to receive from his physician information necessary to give informed consent prior to the start of any procedure or treatment
- to refuse treatment to the extent permitted by law and to be informed of the medical consequences of his action
- to every consideration of his privacy concerning his own medical program
- to expect that all clinical communications and records pertaining to his care should be treated as confidential
- to expect that within its capacity, the hospital reasonably responds to the request of a patient for services
- to obtain information as to any relationship of the hospital to other health care and education institutions insofar as his care is concerned
- to be advised if the hospital proposes to engage in or perform human experimentation affecting his care or treatment
- to expect reasonable continuity of care
- to examine and receive an explanation of his bill, regardless of source of payment
- to participate in planning for care and treatment
- to be transferred to another facility only with full explanation
- to designate who may visit in accordance with hospital policy

The Patient has the responsibility

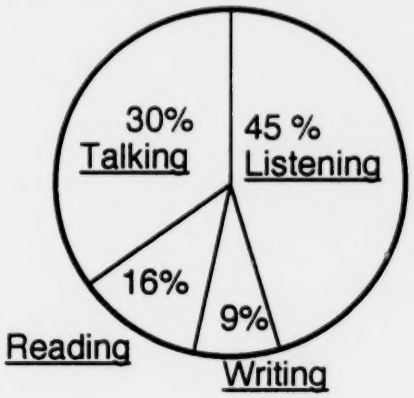
- to provide to the best of his/her knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications and other matters relating to health
- to follow the treatment plan recommended by the practitioner primarily responsible for his/her care
- to assure that the financial obligations of his/her health care are fulfilled
- to be considerate of the rights of other patients and hospital personnel, and to assist, to the degree possible, in the control of noise, smoking, and the number of visitors
- to respect the property of other persons and of the medical center

HANDOUT 2

Active Listening

Goal:	You will be able to understand "active listening" and use its strategies effectively.

Active listening is hearing and understanding what another person is saying and showing that you care about what he/she says and feels.



Strategies -

A. Empathizing - putting yourself "in someone else's shoes" - trying to see things from the customer's point of view. e.g. - "It sounds like this is frustrating you."

B. Paraphrasing - restating in your own words what the other person has said. e.g. - "So what you've said is you're not happy with the way I did this." "Let me make sure I understand what you're saying."

C. Clarifying - asking direct questions to make sure you understand. e.g. - "You feel I'm not pulling my weight, right? Can you give me specific examples?"

D. Using Positive Body Language - Cues that let the other person know you're listening:
- facing or leaning toward the speaker
- smiling or showing appropriate emotion
- nodding
- eye contact

HANDOUT 3

ROLE-PLAY PRACTICE:

This will give you an opportunity to practice active listening. In pairs, decide who will be the "talker" and who will be the "listener." The "talker" will describe a fairly **brief**, familiar **task or procedure** he or she performs at work or at home. This could be describing how to make a simple recipe or give the steps used in doing a household chore, such as washing your car.

The "listener" must **paraphrase, ask questions, empathize, etc.** to make sure he or she clearly understands the procedure. You'll have **10 minutes** to complete this exercise. Afterwards, we'll ask for 2-3 volunteers to share what they learned with the group. This will include explaining the procedure to the group (briefly), but more importantly, telling how you used **paraphrasing, clarifying, etc.** to get your information.

SESSION 2

PROBLEM-SOLVING and RESPONDING TO CRITICISM

Materials Needed:

- Flipchart & Easel
- Tape or Adhesive for Charts
- Markers
- Overhead Projector & Screen (Optional)
- Pens (available for participants)
- Flipcharts (FC) 7, 9, & 10 (or transparencies)
- Handouts (H) 4 - 7

Activity	Notes
I. **Review** last session.	**Ask**: "How did your listening go this week? Can you give us some examples of which techniques you used, body language cues you may have noticed ..."
II. **Refer** them to Communications Model Flipchart (FC 7)	"We're into the second phase of the model now, Problem-Solving. You will notice (and probably already have) how listening skills overlap into all areas of communication."
III. **Present** Agenda Flipchart (FC 9)	
IV. **Refer** them to Communications Survey Handout (H 4)	"These are just a few examples of common poor communication techniques. Take a few minutes to honestly consider each one and decide how you fit in. Then total your responses at the bottom. You'll be able to tell which areas you need to work on. Choose 2 or 3 & list them at the bottom of the sheet. When choosing, think of any which might apply to group decision making or teamwork on your job."

Activity	Notes
V. **Role-Play Demonstration**	**Explain** that one of you is an employee of healthcare facility and the other is a patient, Mrs. Martin.

Negative Role-play

Healthcare Worker: (HCW)	Hi, Mrs. Martin. It's time to go to therapy. I'm here to take you there.
Mrs. M.:	Oh no, I'm so tired today. I'd just like to stay in bed and rest.
HCW:	You're scheduled to go now and the therapist is waiting.
Mrs. M.:	I said I was too tired and my legs and hands are so stiff.
HCW:	Sweetie, you're wasting time and I'll be late to get to the next patient.
Mrs. M.:	(closes eyes and ignores HCW)
HCW:	Mrs. Martin, did you hear what I said?
Mrs. M.:	I'm not going and that's that! Go get the next patient and leave me alone.

Ask: "What listening techniques did you hear (or not hear) being used?"

Activity	Notes
VI. **Present** Problem-Solving Handout (H 5)	**Read** goal with them. **Present** strategies. A. <u>Respect for Individual.</u> With patients: Discuss how patients feel stripped of their individuality - wearing only gowns, their visiting hours may be limited, they don't always understand what's being done to them or why (terminology), they may be scared, feel they're not in control, and are dependent on others for nearly everything. - use patience in explaining things. For example, procedures you take for granted, may be totally foreign to the patient. - address the patient as "Mr." or "Mrs." unless they ask you to do otherwise. With Co-workers: - remember that their department may be shorthanded. - you don't always know what the other person's job involves.

Activity	Notes
	What's in a name? If patients and doctors are on a first-name basis with you, but you address them as Mr. Brown and Dr. Sims, you're losing personal power. When you introduce yourself by your first name, you may encourage submissiveness to doctors and cause confusion in patients who aren't prepared for "instant social intimacy." Instead, you might refer to yourself as Nurse Collins or Ms. White - to keep yourself on the same level as everyone else. Source: *Image: Journal of Nursing Scholarship*, Summer 1993. B. <u>Offer Choices/Negotiate.</u> - consider possible solutions that help other person feel in control of the situation. - this helps foster patient independence when making decisions about such things as food choices, a preferred time for therapy, and long-term decisions, such as future living situation & so on. - **Ask:** "We realize it's not always possible to give the patient or a co-worker a choice. When is it appropriate?" **(discuss)**

Activity	Notes
	C. "I" Language. - focuses on the speaker, not the listener. - you can use the term "Let's ..." as well as "I" -- this indicates teamwork.
Refer them to "I" Language Handout (H 6)	"Working in pairs, change the "you" responses to "I" ones. This is a hard thing to do; it will take a lot of thought and practice. Write your answers in the space provided so you can share your ideas with the group."
Refer them to "I" Language Flipchart (FC 10)	**Elicit responses and discuss.** D. Win-Win Solution. - means finding ways to satisfy needs of both parties. - keeps you open-minded. Even if you don't like the other person, you can recognize they have knowledge you can learn from, or that will help solve the problem. - easy to say "I don't have time, just do it this way ..." -- and sometimes, that's appropriate. But you need to remember to address the issue later - don't just let it drop.

Activity	Notes
VII. **Role-Play Demonstration**	"This is a re-play of the earlier situation."

Positive Role-Play

Healthcare Worker: (HCW)	Hi, Mrs. Martin. It's time to go to therapy. I'm here to take you there.
Mrs. Martin:	Oh no, I'm so tired today. I'd just like to stay in bed and rest.
HCW:	Mrs. Martin, I know how you feel. When I had my knee surgery I couldn't believe the therapist wanted me to get out of bed the very next day. I was tired and my knee was sore.
Mrs. Martin:	My legs and hands are so stiff. They hurt when I move.
HCW:	Yes, I know. That's your arthritis. Therapy will help relieve some of the pain and stiffness. Let me help you out of bed.
Mrs. Martin:	I just don't know if I can do it now.
HCW:	Well, that nice Mr. Evans is in the gym right now and he always enjoys seeing you. If you wait till later, his shift may be over.
Mrs. Martin:	Well . . . I guess if you'll help me I can go.
HCW:	Good, Mrs. Martin, you'll be glad you went to therapy.

Ask: "What techniques was the therapist using this time? How were they helpful? Would you do anything differently?" **Discuss.**

Activity	Notes
VIII. **Present** Responding to Criticism Handout (H 7)	"Take a look at this handout. It's a different & challenging situation. Two common responses to criticism are "fight" or "flight." For example, "It's not my fault. . .", or in the case of "flight," we often avoid the critic completely. When we're getting more information, or asking for specifics, this narrows an overwhelming problem down to a manageable, concrete one - that can be dealt with. Non-defensive responses help diffuse the anger of the critic. This also helps get down to the real problem."
IX. **Role-Play Practice**	**Review** instructions with them at bottom of same handout. (H 7) Circulate around room - see how they're doing. If they have trouble getting started, give them one of these situations to work with: "I can't believe how you run this place!" or "You always ignore me when I have a question." At end, ask a few to share their responses. Then, "Did this exercise help you? How?"

FLIPCHART 9

SESSION 2 - AGENDA

I. Communication Survey

II. Problem-Solving Strategies

- **respect for others**
- **offer choices/negotiate**
- **"I" language**
- **win-win solution**

III. Responding to Criticism

IV. Role-Play practice

FLIPCHART 10

"I" LANGUAGE

"This chart is too messy. You'll have to do it over."

"You still don't understand and I've explained this 3 times! You aren't listening."

"Why did you say you could pay this by today, if you can't?"

HANDOUT 4

COMMUNICATION SURVEY

	Almost Never	Now & Then	Fairly Often	Very Often
When someone disagrees with me, I tune them out because I feel I'm right.				
When others are talking, I'd rather daydream or doodle.				
I don't listen because I already know what you're going to say.				
To solve a problem, I make promises I can't keep.				
If I don't like you, I won't listen to what you have to say.				
I pretend to agree with another person's criticism of me, in order to avoid a confrontation.				
When someone is critical, I get defensive because I take it personally.				
I'm thinking about what I'm going to say, so I'm not listening.				

List 2 or 3 areas you'd like to improve, based on your responses to this survey.

HANDOUT 5

PROBLEM-SOLVING

GOAL: You will be able to use problem-solving strategies to reach a mutually satisfactory solution.

Strategies -

Respect for individual - be patient, recognize and appreciate other person's knowledge and skills

Offer choices - let other person share in decision making, encourage independence

"I" language - non-judgmental; it doesn't blame or criticize and lets the other person know that you don't have all the answers

Examples:

"You" language	"I" language
"You're wrong!"	"I don't think this is right. Let's go over it again."
"You can't do it that way."	"Let's find a better way to do this."

Win-Win solution - not "me vs. you" or "us vs. them"; focuses on solving a problem, not controlling others

HANDOUT 6

Change the following statements to "I" language

"This chart is too messy. You'll have to do it over."

"You still don't understand and I've explained this 3 times! You aren't listening."

"Why did you say you could pay this by today, if you can't?"

HANDOUT 7

RESPONDING TO CRITICISM

Get More Information

- Ask for specifics/examples
  "You said I have a bad attitude. Can you tell me what I'm doing?"

- Paraphrase the critic
  "When you say I have a bad attitude it sounds like you think I'm not giving good service."

Agree with the criticism

- Agree with the facts
  "You're right, I have been late 3 times this week."

- Agree with the critic's perception
  "I can understand why it might seem that I don't care about your needs."

Activity: Role-play practice

Get in pairs - or threesome if need to.

Recall a situation involving yourself or a co-worker, in which criticism was used.

Describe the situation to your partner.

Then your partner will direct that criticism at you.

Your job is to use the non-defensive responses we've discussed - to come up with a win-win solution.

SESSION 3

FOLLOW-UP and CONFRONTING

Materials Needed:

- Flipchart & Easel
- Tape or Adhesive for Charts
- Markers
- Overhead Projector & Screen (Optional)
- Pens (available for participants)
- Flipcharts (FC) 7, 11,12, & 13 (or transparencies)
- Handouts (H) 8 - 12
- Supervisor Evaluation

Activity		Notes
I.	**Review** last session - Problem-Solving	**Discuss** techniques - "I" language, offering choices, responding to criticism
	Refer them to Communications Model Flipchart (FC 7)	**Review** & point out we'll talk about follow-up today.
II.	**Present** Agenda Flipchart (FC 11)	
III.	**Refer** them to Communication Styles Handout (H 8)	"Take a few minutes to complete this survey. Check off all that apply to you some of the time, or most of the time. We'll discuss the different styles afterwards, and you'll be able to see which is your dominant style, and where you and others fit in."
	Present Communication Styles Flipchart (FC 12)	**Explain**: Group 1 is People, Group 2 is Process, Group 3 is Idea, Group 4 is Action; and discuss traits of each. Explain how they should NOTE the differences and accept them. There isn't necessarily anything negative about ANY of the styles - all styles and all types of people have their

Activity	Notes
	strong points. Recognizing that people approach communication and conflicts in differing ways helps us to deal with situations better. Many times, the combination of a "team", or capitalizing on various people's strong points, can accomplish a goal with the best possible outcome.
IV. **Refer** them to Follow-Up & Confronting Handout (H 9)	**Goals - Summarize** - get verification from others - do what you promised. Use TEAMWORK - ask for help in completing tasks if you need it!
V. **Present** Rewards Flipchart (FC 13)	**Ask** for other benefits, get comments, etc. Part of Follow-Up is continuity from one shift to another, and among teams (the transfer of information). - instead of saying "It's not my job!" or "You have the wrong department," agree to check with or find someone who can help

Activity	Notes
VI. **Refer** again to Confronting Handout (H 9)	- motives - Why do you want to confront? To change someone's mind, give opinion, vent? - changes relationship - time/place - private, when you & other person are not angry - plan - use "I" language; write down what you'll say - physiology - physical state Model for Confronting 1. Describe behavior. E.g. "The last few times we've worked together you've complained about me." 2. Explain your feelings. E.g. "I feel you've been overly critical lately. I'm confused. I thought we worked well together." 3. Make a request for change in behavior. E.g. "I want you to tell me if you think my work has not been up to par lately, and why." 4. Describe positive consequences. E.g. "Once I understand how you feel - I can do better. I want to be able to work well together again."
VII. **Role-Play Demonstration**	

CONFRONTING ROLE-PLAY

Set-up: Connie is a day shift nurse. She comes in at 7 a.m. Almost every day, she finds a pile of unfiled paperwork on her desk when she arrives. This has been aggravating her for weeks, and she has left Karen, the night nurse, repeated notes about this. Connie has asked her to please file the day's records, but she rarely ever does. Connie is fed up with this situation, and decides she must confront Karen face-to-face.

First - Connie plans. She must make arrangements to come in early at 6:30 a.m. so she'll catch Karen (her shift ends at 6:30 a.m.) She has to arrange for special daycare that day, but knows it will be worth it. Next - she makes a list of things she wants to say. She takes into account that Karen is a good nurse and a good people person.

Connie thinks about:

1) the behavior that bothers her
2) her feelings
3) the change in behavior that she's going to request
4) the positive consequences of that change

She rehearses what she'll say, as calmly as she can, & anticipates how Karen will respond.

Connie: "Hi Karen. Thanks for agreeing to meet me this morning."

Karen: "Sure."

Connie: "Karen, the reason I wanted to talk with you is because we need to discuss this paperwork issue."

Karen: "Oh, that."

(continued next page)

Connie: "I don't want you to think I don't like you or appreciate your work. You're a very good nurse and a good people person. But when you leave the paperwork disorganized, I start out my day angry and feeling like I'm not in control of my job. If you could find some way to get the filing done, maybe by asking someone else to help you, then we could take care of this by ourselves, without involving anyone else."

Karen: "At night, especially, I feel I need to spend extra time with some of the patients who have difficulty sleeping or are concerned about their families, financial situation, or whatever. Not that I can answer all of their questions, but they need a listening ear.

Connie: "Do you think that's interfering with your getting the paperwork filed?

Karen: "Yes, it definitely does. I think I allow enough time to get things organized, but it seldom happens that way."

Connie: "Is there anyone else on your shift who you feel could help you with this?"

Karen: (thinks a moment) "Perhaps Jane would help. She's at the desk from 4 a.m. on."

Connie: "She sounds like a good person to do the job. Will you ask her tonight, Karen, and let me know tomorrow if that's going to work out?"

Karen: "Yes, I'll make sure I check with Jane tonight at the beginning of the shift. This has been bothering me too."

Connie: "Thank you, Karen. I'm glad we could make an arrangement that works for both of us."

Activity	Notes
VIII. **Role-Play Practice**	**Explain:** "After being verbally abused by a patient several times, you've decided you've had enough. You have discussed it briefly with your supervisor, and she has given you the go-ahead to confront the patient. How will you do it?" Work in pairs or threes to come up with a dialogue you can share with group.
IX. **Present** Telephone Skills Handout (H 10)	**Discuss** points as applicable to group.
X. **Give** Self-Assessment Handout (H 11)	**Ask** participants to put his/her name on it.
XI. **Evaluation** Handout (H 12)	No name is necessary.
XII. **Closure**	Use this time to thank employees who helped with the workshop, i.e. interviews, sign-up, fliers, etc. Mention positive situations you've observed and appreciation you've gained for what the employees do. Stress the need to practice these strategies to improve communication.

Activity	Notes
XIII. **Supervisor Evaluation**	To be given to supervisors who attended, and/or supervisors of employees who attended, 2-3 weeks after completion of workshop. This will provide you valuable feedback, as well as making the supervisors accountable for follow-up and practice, which is critical in communications training.

FLIPCHART 11

SESSION 3 - AGENDA

I. Communication Styles

II. Follow-Up

- summarize action
- do what agreed to do

III. Confronting

IV. Role-Play practice

V. Telephone Skills

VI. Assessment and Evaluation

FLIPCHART 12

COMMUNICATION STYLES

People - spontaneous - hates rules - feeling are important	**Process** - plan - set goals - patient/cautious
Idea - try new things - full of ideas	**Action** - direct - impatient - no small talk

FLIPCHART 13

Rewards/Benefits in Customer Service

* use skills to serve customer
  - patient has pleasant, comfortable stay and will choose to return
  - co-workers have pleasant working environment
* see how system runs - individual efforts add up
* get satisfaction of knowing what you did helped others

HANDOUT 8

What Is Your Communication Style?

Group 1

_____ 1. I would rather work with a team than on my own.

_____ 2. I hate rules and procedures that fail to consider people as individuals.

_____ 3. I let what others think affect my decisions.

_____ 4. I try to put myself in "other people's shoes" whenever possible.

_____ 5. When I get angry, I try not to show it.

Group 2

_____ 1. I like to have a definite plan for doing things.

_____ 2. I like to carefully consider a situation to determine the correct solution the first time.

_____ 3. I would rather discuss a problem at length and consider all possibilities than make a decision with too little information.

_____ 4. I like to set goals so I know what my responsibilities are.

_____ 5. I can listen to a long discussion if it is focused on the topic at hand.

Group 3

_____ 1. I like to see the big picture and let someone else take care of the details.

_____ 2. I like to try new approaches instead of looking at things the same old way.

_____ 3. I like to research a subject on my own.

_____ 4. I really get charged up when I'm telling people my ideas.

_____ 5. I like to challenge authority.

Group 4

_____ 1. During business conversation, I prefer to "stick to the subject" and avoid small talk.

_____ 2. My mind tends to wander when I'm listening to something that doesn't interest me.

_____ 3. I prefer asking direct questions.

_____ 4. If I'm excited about something, it's easy to tell by my voice or gestures.

_____ 5. I like to accomplish tasks and quickly move on to others.

HANDOUT 9

FOLLOW-UP AND CONFRONTING

GOALS: You will be able to clearly understand the action to be taken and follow-up in a timely manner. You will be able to recognize the real problem in a conflict & work with the other person toward a solution.

FOLLOW-UP

- Summarize action to be taken
  EXAMPLE: Employees discussing a patient's care plan. "O.K. Joan, I'll schedule Mr. Adam's for therapy 3 times a week and you'll notify his doctor of the change in his diet."
- Do what was agreed upon in a timely manner

CONFRONTING - assertively dealing with a problem

First - STOP and THINK!
- Examine your motives
- Realize that confronting may change a relationship

Then - Plan and rehearse what you'll say and think of possible responses from the other person
- Choose an appropriate time & place
- Take note of your physical state
  - Are you tense?
  - Is your heart "racing"?
  - Is your face red?

Model for Confronting

Describe the specific behavior that bothers you

Explain your reaction to that behavior -
What you think it means or how it makes you feel

Make a specific request of the listener for a change in behavior

Describe the consequences - positive

HANDOUT 10

TELEPHONE SKILLS

- In telephone communication, you are the single representative.

- The customer can't see you so you don't have the benefit of body language or appearance.

- You have only your **voice** to rely on.
  - Be positive!
  - Smile when you speak.
  - Use a pleasant, animated tone of voice.
  - Repeat customer's name & verify the pronunciation and spelling, if appropriate.

- Remember business calls are a communication with a purpose, not just a conversation.

- When you take or leave a message or make arrangement to call back, verify:

  name and telephone number
  time to call
  information to discuss/purpose of call

- If you don't have the information the customer requested, call anyway to update the situation & arrange another call back.

HANDOUT 11

Focus on Communication
Self-Assessment

Name _____

1. In a conversation, what can you do or say to show the other person you're listening "actively"?
   Name 2.

2. Change the following statement to "I" language.
   "You spend too much time talking on the phone."

3. Imagine that the following criticism was directed at you. Write a non-defensive response.
   "You always ignore me when I have a question."

4. You're a nurse and you've just come out of a patient's room. A doctor in the hall yells at you, "I can't believe you don't have Mr. Morgan's vital signs yet! I expect them by 2 o'clock." Several co-workers are also in the hall and witness the tirade. How would you successfully confront the doctor about this issue?

HANDOUT 12

Focus on Communication Workshop Evaluation

1. Were the goals of this workshop clear?	Vague 1	2	3	Clear 4
2. How helpful were the activities in meeting these goals?	Very Little 1	2	3	Very Much 4
3. Were the handouts and charts helpful?	Not Helpful 1	2	3	Very Helpful 4
4. Was the workshop well-paced?	Poorly Paced 1	2	3	Well Paced 4
5. Are you prepared to practice the strategies?	Little 1	2	3	Fully 4

6. What I found most useful was

7. What I found least useful was

8. About the presenters -
   How were they helpful?

   What could they have done differently?

SUPERVISOR EVALUATION
Focus on Communication

1. Has communication improved among your employees who attended the workshop, or between these employees & patients?

2. Please describe the topics in the workshop you felt were most effective and why, and anything you think should be added or done differently.

3. How do you plan to implement follow-up of the workshop (e.g. such as discussions during staff or team meetings, etc.)?

4. Any additional comments?